

| PATENT APPLICATION FEE DETERMINATION RECORD<br>Substitute for Form PTO-875                                                                                                                                                                                                                                                                                                                                                           |              |                                    |       |                 | Application or Packet Number<br><b>09/818 399</b> |                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------|-------|-----------------|---------------------------------------------------|-------------------------|
| <b>CLAIMS AS FILED - PART I</b>                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       |                 |                                                   |                         |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                                           |              | (Column 2)                         |       | SMALL ENTITY    |                                                   | OR                      |
| FOR                                                                                                                                                                                                                                                                                                                                                                                                                                  | NUMBER FILED | NUMBER EXTRA                       | RATE  | FEE             |                                                   |                         |
| BASIC FEE<br>(37 CFR 1.18(a))                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                    |       | \$              |                                                   |                         |
| TOTAL CLAIMS<br>(37 CFR 1.18(a))                                                                                                                                                                                                                                                                                                                                                                                                     | minus 20 =   |                                    | X \$  |                 |                                                   |                         |
| INDEPENDENT CLAIMS<br>(37 CFR 1.18(b))                                                                                                                                                                                                                                                                                                                                                                                               | minus 3 =    |                                    | X \$  |                 |                                                   |                         |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))                                                                                                                                                                                                                                                                                                                                                                                    |              |                                    | +\$   |                 |                                                   |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    | TOTAL |                 |                                                   |                         |
| <p>* If the difference in column 1 is less than zero, enter "0" in column 2.</p>                                                                                                                                                                                                                                                                                                                                                     |              |                                    |       |                 |                                                   |                         |
| <b>CLAIMS AS AMENDED - PART II</b>                                                                                                                                                                                                                                                                                                                                                                                                   |              |                                    |       |                 |                                                   |                         |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                                           |              | (Column 2)                         |       | SMALL ENTITY    |                                                   | OR                      |
| CLAIMS REMAINING AFTER AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                     |              | HIGHEST NUMBER PREVIOUSLY PAID FOR |       | RATE            | ADDITIONAL FEE                                    | OTHER THAN SMALL ENTITY |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       |                 |                                                   |                         |
| Total<br>(37 CFR 1.18(a))                                                                                                                                                                                                                                                                                                                                                                                                            |              | minus 20                           |       | X \$            |                                                   |                         |
| Independent<br>(37 CFR 1.18(b))                                                                                                                                                                                                                                                                                                                                                                                                      |              | minus 3                            |       | X \$            |                                                   |                         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       | +\$             |                                                   |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       | TOTAL ADD'L FEE |                                                   |                         |
| <p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p> |              |                                    |       |                 |                                                   |                         |
| <b>AMENDMENT 1</b>                                                                                                                                                                                                                                                                                                                                                                                                                   |              |                                    |       |                 |                                                   |                         |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                                           |              | (Column 2)                         |       | SMALL ENTITY    |                                                   | OR                      |
| CLAIMS REMAINING AFTER AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                     |              | HIGHEST NUMBER PREVIOUSLY PAID FOR |       | RATE            | ADDITIONAL FEE                                    | OTHER THAN SMALL ENTITY |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       |                 |                                                   |                         |
| Total<br>(37 CFR 1.18(a))                                                                                                                                                                                                                                                                                                                                                                                                            |              | minus 20                           |       | X \$            |                                                   |                         |
| Independent<br>(37 CFR 1.18(b))                                                                                                                                                                                                                                                                                                                                                                                                      |              | minus 3                            |       | X \$            |                                                   |                         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       | +\$             |                                                   |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       | TOTAL ADD'L FEE |                                                   |                         |
| <b>AMENDMENT 2</b>                                                                                                                                                                                                                                                                                                                                                                                                                   |              |                                    |       |                 |                                                   |                         |
| (Column 1)                                                                                                                                                                                                                                                                                                                                                                                                                           |              | (Column 2)                         |       | SMALL ENTITY    |                                                   | OR                      |
| CLAIMS REMAINING AFTER AMENDMENT                                                                                                                                                                                                                                                                                                                                                                                                     |              | HIGHEST NUMBER PREVIOUSLY PAID FOR |       | RATE            | ADDITIONAL FEE                                    | OTHER THAN SMALL ENTITY |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       |                 |                                                   |                         |
| Total<br>(37 CFR 1.18(a))                                                                                                                                                                                                                                                                                                                                                                                                            |              | minus 20                           |       | X \$            |                                                   |                         |
| Independent<br>(37 CFR 1.18(b))                                                                                                                                                                                                                                                                                                                                                                                                      |              | minus 3                            |       | X \$            |                                                   |                         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       | +\$             |                                                   |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                    |       | TOTAL ADD'L FEE |                                                   |                         |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-0199 and select option 2.